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ABSTRACT

This publication contains short articles and materials which focus on various aspects of intervention, child abuse, neglect and advocacy, family problems, services, and parent education. Included is a general review of the last decade of early intervention programs. Child abuse, neglect, and advocacy materials include definitions of relevant terms, a transcript of an agreement between a Head Start agency and a local department of social services on child abuse and neglect policies, and a review of a handbook designed for child advocates. Articles which focus on the family include discussions of the influence of the family on a child's development, budgeting, the changing American family and its importance, suggestions for preparing a community resource booklet for parents, information on the new Family Privacy Act, and a list of agencies and organizations which serve families and children. Also included are a schedule for training a social services/parent involvement staff, guidelines for developing helping relationships, and reading lists pertaining to emotional deprivation in early life and professional support to the family. (ED)

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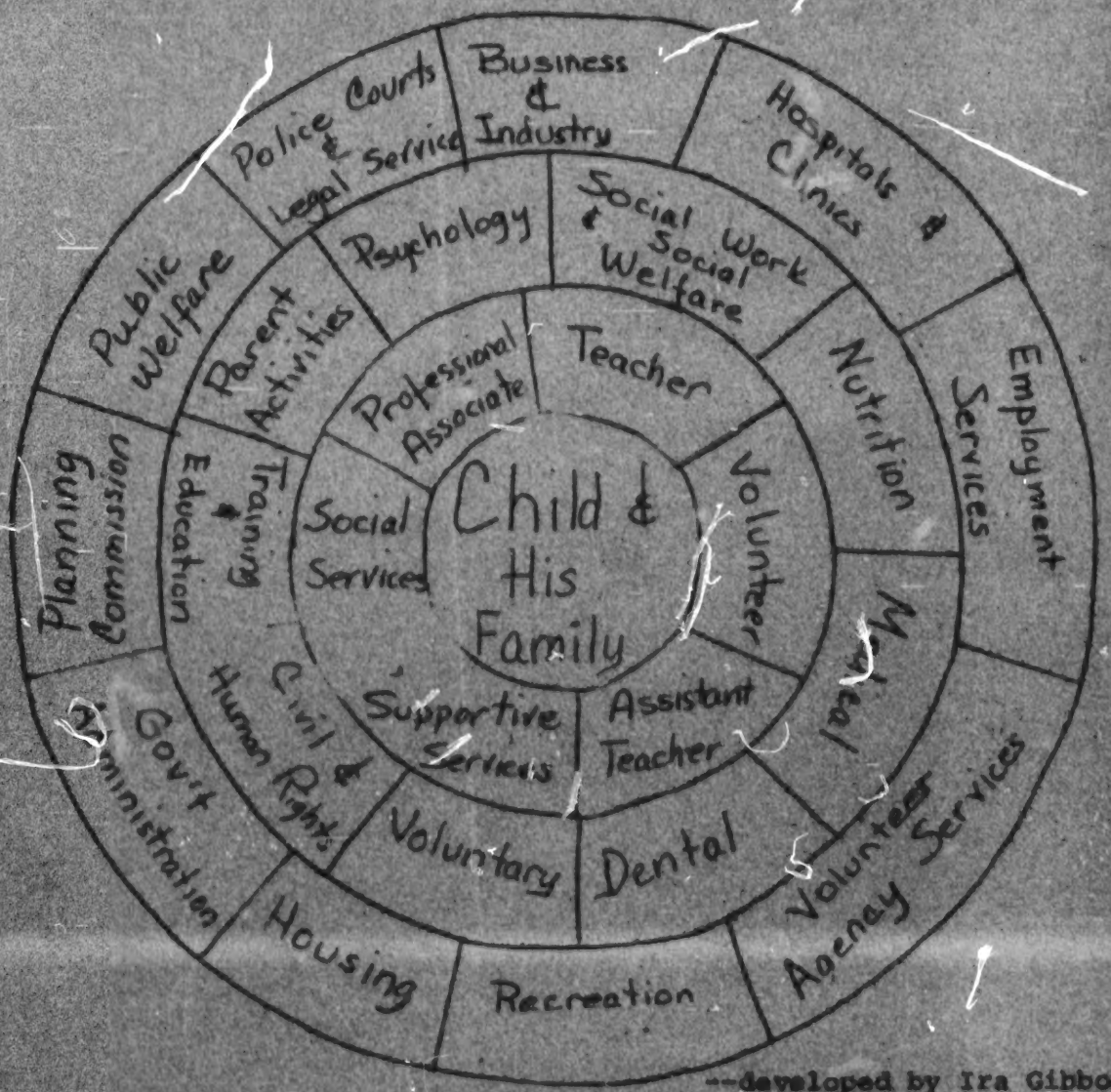
SOCIAL SERVICES AND THE FAMILY



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--developed by Ira Gibbons

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GUEST EDITORIAL

The Social Purpose of Social Services*

There are those who feel that, in a complex and technological society, there are expected incapacities of some people, who are unable to cope with life situations..., and that social services should be provided as "social utilities." Just as we have the lights in this room -- it's a utility. If you don't pay the bill, you don't get any light.

Social services should be built into the very fabric of a planned community, designed for the construction of supportive services for people -- all of the people -- available when and if needed. The option is always there for selective use by all citizens, those who share in the provision of them as well as those who have to make use of the services.

There is that view which requires that social services be an outgrowth of public social policy, which guides what is done and how it is done. The aim of this approach is to treat people with dignity and respect, to enable them to participate in the program (constituents and staff alike), and to develop a sense of self-direction and self esteem, which they can use for the development of their potentialities for self-realization and self-actualization.

The social purpose of social services is to be ... an enzyme. And -- for those of you who have not had the opportunity to study chemistry -- you have an enzyme and a catalyst. A catalyst, for instance, is a part of the body that gets things started but does not, in itself, become part of what is started. An enzyme, on the other hand, like saliva, for example, as you eat will become part of what you eat -- and therefore, as you eat your food and it is consumed into the body, part of what has happened is that your enzymes have become part of that and stay with it. And so, when we talk about people being catalysts in situations, I say, no -- they're enzymes, because every time you enter into a situation with other people you leave part of yourself with them. See? So - make sure it's the best part of you that you leave with them.

The role of social services is to be that of an enzyme facilitating the action taken by other supportive services. Its function is to serve as a cement holding the bricks, which causes the wall of human relations to become strong. Social work is human relations. Social services means that the community and the nation are willing to mobilize their resources as collective instrumentalities to human services.

--Ira Gibbons

*Abridged from remarks presented at a LIMC Child Development Training Center in service seminar.

IDEA EXCHANGE ADVISORY COMMITTEE

Idea Exchange continues to focus, in each quarterly issue, on a general topic helpful to educators of preschool children -- particularly Head Start staff members and parents. Readers are encouraged to contribute to this forum.

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A DECADE OF EARLY INTERVENTION PROGRAMS:

WHAT WE HAVE LEARNED

by Bettye M. Caldwell, Ph. D.
(Presented at the 1974 meeting of the
American Orthopsychiatric Association)

In 1964 -- just a decade ago -- Julius Richmond and I received a grant from the Children's Bureau to establish The Children's Center, a day care center for children under three years of age, in Syracuse, New York. It was not a popular thing to try to do then. This was just at the end of the "maternal deprivation" decade, and most professionals felt that any sort of extra-home care for infants would surely be damaging. But for the previous four years (along with a group of colleagues including Earle Lipton, Len Hersher, Evelyn Eddy, Albert Rothman, and George Stern) we had been working with (and talking and listening to) a group of very young, very poor, often unmarried mothers and their mostly unplanned babies. Upon observing the chaotic child care arrangements provided many of these infants, we knew that some systematic child care program for children younger than three was necessary. So we cautiously plunged and were quickly into the intervention business. The following year, in February 1965, Julius Richmond became the first director of Head Start. And the rest is history. Because of Head Start, and the contribution to it made by Dr. Richmond, early childhood can never again be ignored in America (or the world) as an important developmental period.

Developmental Stages of the Last Decade

Since those of us in Ortho tend to like personality theories that involve developmental stages, I have sketched out the highlights of the past ten years in a series of stages, as follows:

Period of Optimism

No one who was not a part of it could possibly appreciate the excitement of that spring and summer of 1965. Impassioned rhetoric flowed like foam at a beerfest in Munich. We were going to accomplish miracles for the children of America. After all, miracles were needed. So excited were many of us by the possibilities of Head Start that we went on record to protest that a six-week summer program could not hope to do all that was required -- develop a positive self-concept, produce new levels of language competence, discover and correct an accumulation of five years' worth of medical and nutritional problems, and convince parents that early intervention was a solution to all their problems. There seemed to exist an unverbalized fear that if one dared suggest that too much was being expected, it would remove the opportunity to make even a small beginning.

But many of us were uneasy. In an address that I gave in the fall of 1965 -- by which time the enthusiasm had not diminished to any significant extent, and by which time no formal evaluation had appeared and

the informal ones were all still favorable and optimistic--I tried to express some of my anxiety by suggesting that the inevitable sequel to oversell is overkill. Others began to express similar notes of caution.

In the spring of 1966, the first trickles of data began to appear. Most early studies reported gains in IQ for children who participated in the summer Head Start program, but by the time the Head Start children were compared to a control group at mid-semester in the regular school environment, the differences appeared to have washed out. Similar findings were reported for school achievement. Thus it seemed that the early research was showing an initial rise followed by a plateau or a decline -- initial superiority over control groups, followed rather quickly by a catch-up phenomenon in the controls. It was at this time that we entered the next developmental stage.

Period of Skepticism

Skepticism is always healthy, and so it was with respect to early intervention programs. It helped re-orient our thinking from questions about whether effects were produced, to the more reasonable questions of how, what kind, and with which children. With the skepticism came some meaningful moves on the part of Head Start's planners and operators, in the direction of evaluating the program's effects. The longitudinal study of the Educational Testing Services, which has been in operation for a number of years and which is scheduled to run through 1974, was launched. Within the Office of Economic Opportunity itself, funds were made available to establish a number of Head Start Evaluation and Research Centers. Furthermore, plans were made for the launching of a large-scale national evaluation to be carried out by a completely independent agency -- what has come to called the Westinghouse Report. In addition to these preparations for a more comprehensive evaluation, there was closer attention to educational fare being offered under the rubric of compensatory early education. No longer was it assumed that any early education would produce effects; rather a healthy, if often partisan, degate began regarding the nature of the educational experience that would be associated with the most desirable effects.

In 1969 the Westinghouse Report, so called because the study was conducted under the auspices of a subsidiary of the Westinghouse Corporation, was published. The Westinghouse study is widely cited as having shown that Head Start had no "effect" on the children. Actally, that claim is an overstatement, for there were indeed some effects. The study used as its sample former Head Start children from 104 centers, about 75% of which were full-day program. The children at the time of this study were all in grades one through three. Altogether there were about 4,000 children involved in the Head Start and the control samples. Data consisted of tests given to the children, interviews with parents, interviews with officials who had run the centers ratings made by teachers, and so on. There appeared no question but that attendance at a summer only Head Start was not associated with any academic superiority during subsequent regular schooling. Furthermore, there appeared no major differences on the various indices used of self-concept and general social behavior. However, often overlooked in reports of the Westinghouse study were some difference that emerged when fullyear programs were examined separately by geographic regions, by urban-rural locations, and by racial composition of the children.

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In general, these analyses indicated that Head Start children tended to score higher than did controls on cognitive measures, especially where centers were in the southeast or in large urban areas, and served predominantly black groups. Even though the magnitudes of most of these differences were small, they were statistically significant.

I am convinced there is a zeitgeist that influences our interpretation of facts. A good example can be found in the recent exoneration of two former State Department officials who twenty years ago suggested that there would be advantages for this country in working with the Chinese Communists. At the time they made their recommendation, it was very unfashionable and they were dismissed from their jobs and disgraced. Now the fashions have changed, and they are enjoying at least a brief vindication. There is no question in my mind but that the same kind of phenomenon occurs in the acceptance or rejection of scientific findings. I well remember, for example, the way Piaget was quickly disposed of by my professors when I was a student. The times have changed.

Period of Disillusionment. So the field moved into a new developmental stage -- skepticism changed to disillusionment. Was the human organism really less modifiable during this early period than had been hoped? An equally famous document, which has come to be called the Jensen Paper, seemed to suggest so. Were all our gains to prove evanescent and inconsequential? Was enrichment without continuity an exercise in futility? Or were there errors in the design and execution of the Westinghouse study that made conclusions unstable and unreliable? Was the evaluation carried out in developmental areas that had no true social relevance?

During this period of disillusionment new cliches began to be heard in the land: "It doesn't make any difference what you do to or for kids-they are going to grow up about the same." "Why should large sums of money be appropriated for something that doesn't do any good?' "We don't really know anything about child development. Our research has been inconclusive and contradictory, and we don't have any proven techniques for working with children." Such remarks are uttered far more frequently than should be the case among people with any wisdom, judgment, or plain common sense.

Trying To Consolidate

But no development would be content with terminating a series of developmental stages with a negative one. The next, higher stage I have called regrouping, or consolidating. It embodies several achievements -- learnings, if you will -- of our earlier stages which, if remembered, will help us to avoid our former errors and to consolidate our gains.

1. We have learned that we talked too much and too glibly, sometimes promising developmental outcomes recklessly, although aware that failure to deliver might hurt children more in the long run than not promising anything in the first place. We talked too much about who was "disadvantaged," without thinking through the implications of such a term. We oversimplified some enormously complex developmental phenomena.

2. We learned that people with different kinds and amounts of training can work together with mutual respect and support. One of

the most beautiful aspects of Head Start was that it was planned as an interdisciplinary project from the very beginning. There was concern for the child's health (including that oft-excluded component, dental health), nutrition, social attitudes, and learning, along with determination to involve the parents in goal-setting and program operation. I well remember the panic that existed in some quarters that first spring about where we would find all the trained people necessary to work with the children in the actual Head Start classrooms. But people were found, and people have continued to appear who have the necessary commitment to children and the adaptability to work with people from different professional or cultural backgrounds.

Head Start has done more than any other modern social institution to challenge some of our existing knots of credentials. We might say that, in this function, it has exemplified a principle that has guided Ortho since its inception -- the team approach to working with people. But Head Start widened the team concept to bring in still other professional groups and to open the entry path for paraprofessionals to meaningful jobs and better salaries. In fact, the consortium of groups working out the details of the concept called the Child Development Associate may be doing more than any group anywhere to stimulate fresh though about the credentialing pattern in any field. By specifying -- not an easy task -- the competencies necessary for persons who will work in child development programs, the CDA Consortium is trying to make the idea of a career ladder real.

3. We have learned that in our legitimate preoccupation with evaluation, that handmaiden of accountability, we took too narrow a view. Why did those of us who offered recommendations about evaluation designs back in the early days of the early intervention movement permit ourselves to get locked into the use of IQ tests, when most projects were really not concerned with IQ per se? The early extravagant promises about what Head Start would achieve did not include raising the IQ. Most of the statement referred only to school achievements. But because we knew that school achievement is highly correlated with IQ, especially during the early school grades, we allowed ourselves to be seduced into using this measurement. Why? Like Everest, the techniques were there - and we trusted them to a certain extent. On the other hand, we had relatively little trust in most of the available measures of the other characteristics we were hoping to impact -- self-concept, attitudes toward school and society, mental health, feelings of personal worth, self-discipline, and general happiness.

We should have learned from our measurement problems that we must be more cautious in the future about what we offer to measure. We have seen few dramatic developments in the field of measurement of human attributes during the past decade. Our concepts of what is appropriate measurement have matured, but out "on the line" techniques are about where they were a decade ago. Furthermore, traditional measurement strategies are being denied researchers in some situations. For instance, true control groups are fortunately becoming a thing of the past, as in some communities we are saturating the available populations with intervention. Even more important, we have come to recognize that randomization, a procedure which is basic to essentially every statistical technique we use to interpret our data, is impossible in most of our program evaluations. Thus all of our tried and tested dat

analysis procedures are to some extent suspect in even the best research plans we can make. The very fact that we cannot always fairly evaluate should serve to temper our promises of what we can accomplish.

4. We have learned to take defeat -- to roll with the punches and regroup. I well remember the gloom that pervaded the field with the publication of the Westinghouse report and of the Jensen monograph. Even more poignantly I recall the depression that followed the Presidential veto of the 1971 Comprehensive Child Development Act. Here was something that had been carefully researched by the legislative committee that wrote the bill and by the Congressmen and Senators who shepherded it through the legislative process. People working in child development programs all over the country had worked actively for passage of the bill and had felt a momentary sense of success. But, with defeat, one thing we learned was how hard the opposition had worked. Reportedly, communications to the President had run a hundred to one against the bill. In defeats such as this we are learning, as are all organized groups, about the necessity for bing citizens, not just professionals. Ortho led the way among professional groups in being willing to take a stand on important social issues. Now many other groups are doing so.

5. We have learned the importance of continuity from one departmental period to the next. The period of life we are concerned with does not sit off all by itself but is part of the total life process. For several years many of us were so charmed by the concept of the critical period that it seemed we did not need to be concerned with programs for children after the age of six. Perhaps some of the partisanship came from the feeling that we needed to sell the importance of early childhood, whereas people already seemed to recognize the importance of the school years. But certainly our data of the past several years have convinced us that, no matter what wonders for children we might accomplish during the early years, adverse experiences later can wipe these earlier gains. Thus we need to be intimately concerned about what happens to children who leave our early intervention programs. We must develop some kind of advocacy program that enables children from early intervention programs to receive in subsequent years the kinds of services they need to ensure their continued development. Of course, this is but another way of saying that we need enlightened and sensitive programs for people (not just children) of all ages. But certainly in the last decade, we have discovered that learning does not stop at age six! If we knew it all the time, we didn't always act as if we did.

Summary

In conclusion, I might cite one of the oldest and the most inescapable of economic principles: There is no such thing as a free lunch. It's an excellent principle for those of us in early intervention to keep in mind. Somebody pays, and we are that somebody -- both as professionals and as citizens. In the 1960s, it was wonderful to have one's work discovered and to move to the front of the line, where encomiums were distributed free of charge, or so it seemed. In response, we professionals made promises just as freely and wildly. And parents were so eager for the services and their benefits that they were willing to demand program expansion, acting as though this could be made possible without large expenditures of money and

without a national commitment to children. But, of course, program expansion is not free either. Somebody has to pay.

At this point in history, there is no question but that early intervention can now pay its own way, theoretically and pragmatically, as a field of human endeavor with an important contribution to make to life in present and future generations. We will not be able to pay if we promise too much, for the price will be too high. Hopefully, now that we better understand our role in the total ecology of programs for children and families, we can be more conservative about our potential contributions, and thus more likely to be found adequate for the task.

EMOTIONAL DEPRIVATION IN EARLY LIFE

by Irene Glass

The whole area of mental health is interested in what happens during the first, and the first few, years of life. Our program at Pitt County Mental Health Center, Greenville, North Carolina, has shared readings recently in this area and they include these articles and books:

A good, short article is "A Therapeutic Approach to Treating a Grieving Two and One-Half-Year Old," by Margie B. Clark, M. S. S. W. This child's father had died and the mother had moved several times. The article appears in the October 1972 issue of the Journal of the American Academy of Child Psychiatry.

The July 1973 issue of the same publication carries "Depression and Recovery at Nine Weeks of Age," by Ray Taylor. It explains that young children do not have defenses built up and a change in their environment may cause them to suffer as a result. In the case cited in this article, an older child in the family entered the hospital and the mother had less time to spend with the younger child. We should be more aware of the lack of defenses in young children. I know this to be so from my experiences when we have lost mothers.

Another Journal of the American Academy of Child Psychiatry article is entitled "A Failure to Thrive" by Sue L. Evans, John B. Reinhart and Ruth A. Succap. It is a study of 40 families with children who experience this failure due to underlying emotional factors in their social environment. The children had symptoms of illness with no organic basis. The families were broken into three profiles based upon the mother's attitudes and behaviors and the family backgrounds.

I have also learned recently of the film on early intervention, "I Am A Child." This could be secured from local mental health centers, probably, or, in North Carolina, from the Department of Human Resources, Division of Health Services Film Library, P. O. Box 2091, Raleigh, 27602

Other readings we have found useful have been Crisis in Child Mental Health Challenge for the 1970s: A Report on the Joint Commission on Mental Health in Children 1969-70 and Mental Health From Infancy and Adolescence: Reports on the Joint Commission on Mental Health in Children, 1973. Both are published by Harper & Row.

SOME DEFINITIONS TO GUIDE US

from information in Day Care Services Newsletter

Day Care Services Newsletter reported in its winter 1975 issue that as many as 5,698 children in North Carolina were confirmed by County Departments of Social Services as having been neglected or abused during the period between July 1, 1973 and June 30, 1974. According to this article, by Ellen McClearen, Protective Services Supervisor, North Carolina State Division of Social Services, the Child Abuse Reporting Law makes the following definitions:

Abused Child.

One whose parent or caretaker: 1) Inflicts, or allows to be inflicted, a physical injury (other than an accidental one) which creates a risk of death, disfigurement, impairment of health, or impairment of function of any bodily organ, or 2) Creates, or allows to be created, a substantial risk of physical injury to a child which would be likely to cause death, disfigurement, impairment of physical health, or loss or impairment of function of bodily organs, or 3) commits, or allows to be committed, any sex act upon a child.

Neglected Child.

The law defines a neglected child as one who: 1) Does not receive proper care, supervision or discipline or 2) Is not provided necessary medical care, or 3) Who has been abandoned, or 4) Who lives in an environment injurious to his welfare, or 5) Who has been placed for care or adoption in violation of law.

The Child Abuse Reporting Law is Federal legislation which applies to all states.

SOUTH CAROLINA PROGRAM SETS OWN POLICY AND PROCEDURES ON CHILD ABUSE AND NEGLECT

by Mellie Hill Barlow, R. S. W.*
Florence County Full Year Head Start

Background

In July 1974, the Office of Child Development (OCD), Department of Health, Education and Welfare (HEW), Washington, D. C., requested that Head Start agencies work with their local Department of Social Services in seeking to implement the Child Abuse, Prevention and Treatment Act.

The Florence County Full Year Head Start Program has a written agreement with its local agency which is reprinted here.

We have determined, with the Department of Social Services (DSS), how to identify, assess and implement special protective services for Head Start families and children needing them. Agencies will work together, but with extreme confidentiality, so that parents' and children's rights will be protected.

Perhaps other Head Start staffs would like to consider this type of policy and procedure of referral.

(ED. NOTE: Agency representatives may comment upon this article to the Idea Exchange.)

Written Agreement

The responsibility of providing protective services to abused and neglected children and their families in Florence County is vested in the Florence County Department of Social Services.

As requested from the OCD, HEW, Washington, D. C., this agency will cooperate with the Florence County Head Start Program in seeking to implement the Child Abuse, Prevention and Treatment Act.

This will be a reciprocal agreement between Florence County Department of Social Services and Florence County Head Start insofar as servicing children and their families.

Department of Social Services will offer any technical assistance and training as requested by Florence County Head Start. This will include formal and informal regular communication with staff at all levels from both agencies.

The established system for the identification of Child Abuse and Neglect is implemented as follows:

*Registered Social Worker

Procedures:

Referral will be made by office visit to the Protective Service intake workers at DSS or their supervisor(s).

Pertinent information will be shared during referral visit with DSS. Protective Services will make home visit(s) within 72 hours. Data which will be shared by Head Start at time of referral are:

Child's name *Birthdate*
Sex *Race*
Address of child *Name, address and age of parents*
Name, address and relationships of alleged persons who are abusing child

Types of neglect (physical, sexual, medical, educational, and/or emotional

A brief description of a specific incident

A copy of a medical report if the child received medical attention (If not available, when treated and by whom)

Other agencies involved and contact persons for additional information. (Whether or not child is in court custody and if court hearing has been scheduled.)

A child abuse form will be filed with the Children and Family Services Division, Department of Social Services in Columbia, South Carolina and a follow-up report will be made to Florence County Head Start.

Aids in Identification of the Abused and/or Neglected Child:

Behavior Disorder:
- *Withdrawal*
- *Aggression*
- *Hyperactivity*

Habit Disorder:
- *Bedwetting*
- *Sucking thumb*
- *Banging head on wall*

Conduct Disorder:
- *Temper tantrum*
- *Lying*
- *Stealing*
- *Abnormal sexual behavior*

Neurotic Traits:
- *Extreme jealousy*
- *Extreme sleep walking*
- *Extreme curiosity*

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Psycho-Neurotic Traits
Hysterical behavior
Excessive phobia (fearful) behavior
Compulsive behavior
Hypochondria or (excessive anxiety about health)

Characteristics of the Average Abusing and/or Neglecting Parent are:

Impulsive
Crisis rider
Rigid
Hostile, distrustful and suspicious
Fanatically religious
Usually picks on the youngest child to abuse
Pleasure Loving
Competitive and selfish
Immature

Definitions of Types of Neglect are:

Physical Neglect: Failure to meet the physical wants and needs of the child in relation to food, shelter, clothing, personal hygiene or need for supervision. Also to include malnutrition.

Education Neglect: Failure to make available to a child necessary education that is required by law.

Medical Neglect: Failure to provide for a child necessary diagnosis and/or treatment of a medical condition whether physical or psychological.

Emotional Neglect: Failure to provide for the child emotional nurturing or emotional support necessary for the development of a sound personality as, for example, subjecting the child to rejection or a home climate charged with tension, hostility and anxiety producing occurrences which result in perceivable behavior problems in the child.

Physical Abuse: Any injury to the child which is not accidental, to include beatings, welts, lacerations, burns, broken bones, hematomas (swelling containing blood), sprains, etc.

Sexual Abuse: Subjecting a child to sexual exploitation or activity. The abuse may be as mild as fondling or manipulation of the child to full sexual penetration of any sexual act.

Abandonment: In the sense of child abandonment, the term relates to the factual situation of a parent leaving a child unattended or leaving a child in someone else's care, with no intent to return to assume care and responsibility for the child.

CASE STUDY IN SOCIAL SERVICE COORDINATION
FOR INDIVIDUAL DIAGNOSIS AND PLACEMENT

by Ellen Farrior

"We've tried everything with Ted*-- firmness, gentleness, even ignoring his behavior, but nothing seems to get at the root of the problem. We are at the end of our rope." The Head Start teacher wrung her hands in dismay over a child who had been disruptive, not only to her class, but to all the others in her part of the building.

This boy was one whom we had accepted in Head Start as emotionally and mentally handicapped. Now, several weeks after school has started, we recognized our limitations and turned immediately to well-trained professionals: the local coordinator or services for the mentally retarded and the child psychologist with the school system. They responded promtly, coming the following day to observe the boy in class, then accompanying the social services worker on a number of unhurried and productive visits with the parents.

This situation developed in late September, 1974. Since that time, we have worked with a number of different agencies. The young woman from Services to the Mentally Retarded helped make arrangements for Ted to be evaluated at Western Carolina Center, we had a number of contacts with the family's private physician and the child psychologist worked with the teachers in trying new methods of dealing with the boy. A highly-trained psychologist at the Mental Health Clinic is counseling with both parents. All of us involved in working with the family coordinate our efforts closely.

It was agreed by the various professionals that Ted was severely distrubed and needed a kind of prolonged, individual treatment which we could not offer locally. He has been accepted in one of the state "group Homes" where he will be one of nine children and will receive the "one-on-one" attention that he needs. The child psychologist there, after studying Ted's records, is optimistic that we have reached him in time to help him.

We, at Cleveland County Head Start, in Kings Mountain, North Carolina, are happy, not only about the good outlook for one of our children, but also about the warm relationships which have resulted from our contacts with concerned people in other agencies. We are genuinely gratified.

*Name changed to maintain confidentality

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To Protect and Respect:

A Child Advocate's Handbook

by John W. Pelosi and Sandra L. Johnson
Published by the Learning Institute of North Carolina, 1974. 60+ pp. Free. Supply limited.*

*Those receiving copies will be asked to evaluate the publication

Reviewed by Margaret C. Vidal

This handbook is one of the results of the Child Advocacy System Project. The project's general purpose wase to learn about the concept of child advocacy and its practical application in communities and neighborhoods where children live. A team of four advocates worked with about 120 children and their parents, friends and teachers. The team also worked with community ciizens and professional workers who influenced the lives of these children.

Child advocacy involves making sure children receive the "services" necessary for healthy growth and development. The function of child advocacy is not to provide these services but to see that children get them from whomever is responsible for providing them.

To Protect and Respect is intended to help a person act as a child advocate. The child may be close to you because you are his parents or because you are his friend.

Before describing the advocacy process it is important to make a number of points about advocacy. Many people who live close to or work closely with children provide both a service function and an advocacy function. Consider this example:

"A father who takes his daughter to the city playground and watches her while she plays is performing a kind of "service" for her. If he notices that some of the equipment is unsafe, reports it to the city recreation department, and makes sure the equipment is made safe, he is advocating for his daughter, as well as other children who play there."

This example illustrates the differences between service and advocacy. "Service" is providing the child with something he needs, whether it's food, clothing, education or recreation. Advocacy involves checking to see that he's getting the "services."

Child Advocate's Main Tasks

The three main tasks that must be carried out by a child advocate are: (1) Monitoring, which is actively seeking information about the child and how he experiences the different situation he is in. (2) Assessing, which is deciding whether a change is needed in any situation the child is in. (3) Advocating, which is acting to bring about a change needed for the child. Each of these three tasks contains a number of steps which are described in the handbook.

Monitoring, the first task, is made clear by the use of a flow chart showing how each task is related to the other. One must find first what is happening to the child and how he experiences it. Once information through monitoring has been collected, one can assess the situation. The three possibilities for decision are based upon whether the situation is good, bad or uncertain for the child.

If the situation is bad for the child, one must advocate for the child is some way. Once the advocate action is successfully completed, monitoring continues. If uncertain whether the child's situation is good or bad, one can seek to clear up the uncertainty by seeking more information. This is called focused monitoring. If it turns out to be good for the child, simply continue to monitor until the three-step process can become completed.

The handbook seeks to answer why it is important to keep the picture of the relationship of the three steps in mind. One needs to look. Is there a stopping point? The starting point is when monitoring begins.

One task a person may be faced with is getting some people to understand and accept the idea of advocacy. They will question requests for information about a child or another's right to invade their territory. Every profession has its supply of individuals who want to resist advocacy efforts. The point to keep in mind is that some people will not understand or agree with what you are trying to do.

Advocacy an Important Function

The notion of advocacy as a natural but important function, necessary to help the child service system work better, is supported here. Making this natural function more explicit through the handbook is helping people think about it more carefully. Parents and others close to children should think carefully about advocacy and agree with the authors about its importance to the point where they act on it by using the handbook. We have no axe to grind except to help children grow.

Interplay Between Service and Advocacy

Things are going well for many children and their parents because there is a good interplay between service and advocacy. This handbook is for those who are NOT certain about the "services" their child, or another's, is getting or for those who are sure a child is NOT getting what he needs.

FOCUS ON THE FAMILY: A PRIORITY FOR HEAD START

by John Niblock

Head Start has insisted, from its beginning, on strong programs of parent involvement. This has helped keep the programs relevant to the needs of the families they serve. It also has helped brothers and sisters of Head Start children, because they also have benefited from the things their parents learned through Head Start.

If you take a child out of a family, as so often the public schools do, and put him or her in a program where there is little involvement with the family, you may be able to help the child. But when the program ends or the child "ages out" or for some reason leaves the program, the benefits end. On the other hand, if you set up a partnership with families, working together with them to benefit the child, your influence may continue as long as the family is intact.

The first kind of program described above, where the "professionals" work directly with the child and more or less ignore the family, is called a "child-centered" approach. The second, where the "professionals" work together with parents, is called "family-centered."

The importance of the family, and its overwhelming influence on children, is discussed in another article in this issue. Let's look at some research evidence on the family-centered approach.

In a project at the University of North Carolina at Chapel Hill, young children were tutored in the home by professionals. There was little parent involvement. During the project, more than 300 home visits were made over a 21-month period. At the end of the project, the children's I.Q.'s averaged 106. For a "control group" of similar children that received no tutoring, the average I.Q. was 89. But three years after the project ended, the I.Q. averages of the two groups were almost identical.

Dr. Earl Schaefer of the University of North Carolina at Chapel Hill concluded that the effects of the special tutoring these preschool children received "washed out" in three years. Like most "child-centered" approaches, the benefits ended when the program ended.

In contrast, a similar project directed by Phyllis Levenstein worked with mothers in the home to show them how to use books and toys with their preschool children. This project ran only seven months and involved only 32 home visits, but the immediate gains the children made--an average increase of 17 points in their I.Q.--were equal to those made in Schaefer's project. Three years later, the child-centered program's impact is continuing, with the children showing above-average I.Q. gains.

Research in New York compared results in two kinds of reading programs. One group worked with parents on their children's reading for an hour a week. Another groupworked directly with the child for two hours a week. Children whose parents were in the one-hour-a-week

group were found to be reading better than children in the group that spent two hours a week working directly with the children.

Working with parents can provide a multiplier effect.

Family-centered programs, Dr. Schaefer concludes, are just as effective as child-centered programs on a short-term basis, are much more effective on a long-term basis, and cost a lot less. Also, he notes, they have greater "spin off" effect on the family and the community.

Researchers have found that paraprofessionals, with adequate training and supervision, can work just as effectively with parents as can professionals. This is important, because few professions--education, child care, or health, for example are training their professionals to work with parents and families. The use of paraprofessionals will make more people available who can work effectively with parents, and also lower program costs.

The basic need, however, as Dr. Schaefer sees it, is to "change institutions, professions, and training programs" so that families are viewed as partners and not as "clients" or "patients."

Perhaps the greatest achievement Head Start could make in the community and in the nation would be to reform the system so that our schools, health clinics, government planning agencies, police departments, and all the other institutions and agencies set up to help children would become aware that the only way they can do it effectively is by working with families.

Head Start is one of the few programs that actively promotes family involvement. Most professionals that work with children either are afraid of parents (public school teachers and day care center operators come to mind), or don't really trust them (pediatricians and government agency officials might be examples).

Dr. Schaefer points out that parents exercise the greatest influence over the child, influence that lasts over a longer period of time. Also, they care for the child continuously.

Using health care as an example, Dr. Schaefer points out why parents are more important than doctors and other health professionals in providing for the health of their children:

1. Parents have greater influence on the child's health and nutrition than professionals.

2. Parents' influence over the child lasts longer and is continuous; professionals see the child at intervals, and different professionals usually are involved.

3. Parents provide a greater amount of health care, both in prevention and treatment, than health professionals.

4. Parents provide more varied types of care and share more different

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experiences and situations with the child than do health professionals.

5. Parent and child are more closely involved with each other than professional and child.

6. Parents provide more consistent patterns of care for the child that have a cumulative effect on his or her development than do professionals.

7. Parents have the major responsibility for the health, education, and welfare of their children; professionals do not.

Head Start and other programs for young children exist to support parents, not to replace them. Yet some professional policies and practices may be weakening the family-child relationship rather than strengthening it. Parents should never be given the impression that "we're doing this for you--so leave us alone."

Dr. Schaefer cites the example of the teacher who said to a group of parents, "Please don't teach your child to read or do arithmetic. Your method may be different than mine. Send me a happy child and I will educate him."

If the family's ability to help their child grow is increased, this will be more effective in the long run than anything we can do for the individual child. All programs for children, Dr. Schaefer contends, should be "more family-centered, parent-centered, and community-centered."

Many parents are working, and it is hard to find a time when they can meet with staff members. The answer to this, of course, is to make time. If parent involvement is the key to the development of the child, perhaps schedules, staff patterns, and budgets should be shifted if necessary so that families and staff can spend time together regularly--even if it's on a Saturday. Perhaps parents who are involved can be used to work with parents who are not. Perhaps if transportation and child care services were provided, it would be easier to involve parents.

As Dr. Schafer puts it: "The professions must begin to teach others how to teach, rather than doing all the teaching themselves; to teach others how to help, rather than doing all the helping themselves.

Most parents, Dr. Thomas Gordon contends, are "blamed but not trained." There is probably no job more important than the rearing of children, yet parents in America receive no training for it. Our public schools do little to prepare their graduates to be parents, though most of them will become parents. Our other institutions offer little "inservice" training for parents.

The books and pamphlets developed for parents are often unrealistic, especially for working parents. Many, one reviewer asserts, suggest things that demand more time and energy than most parents have, and unwittingly make parents feel anxious and guilty.

If good things for the child are not happening in the home, it

usually is not because parents are unwilling to provide them. They may be unable to provide them because they don't know how, because they can't afford to, or because of emotional or physical illnesses.

A study by Dr. Urie Bronfenbrenner of Cornell University found that "those programs in which the greatest and most lasting gains were made were home-based and directly involved the mother (or other full-time person who had a one-to-one relationship with the child)." The federal Home Start program is a response to this important finding.

Families determine how a child develops. We all come from families, and live every day influenced by them. If we in Head Start are to help the child, we must do it by helping the family. Perhaps this is the hardest job we face. Certainly it is the most important.

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KEEPING A FAMILY BUDGET

by Shirley Archie

People who have difficulty in making ends meet or who spend more than they earn can often use a budget. A budget is a plan to help people make the most of their money. It makes no difference if your income is from earnings, Social Services benefits, Social Security insurance, budgeting your income can help everyone.

Three reasons for budgeting are: (1) it helps you to live within your income, (2) it helps you get the things you want most and (3) it provides an education in money management.

There are four steps in setting up a budget:

Planning your budget

Planning how you spend your money is a very important part of making your budget. All family members should participate in helping to plan the budget. This way everyone will know how much income is available and how it will be spent. It has been said that most family arguments come from the family income. This can be avoided if each person is in on the planning.

Setting goals you hope to achieve

There may be a need for a winter coat for one of your children. This can be accomplished if you decide how much money you can save toward this coat and out if in your budget plans each month. It could be as little as $3.00 a month but in a year you would have $36.00. For some families $3.00 a month may mean going without somethings or spending less on other things but this is what setting your goals means. In setting goals, you decide on the things you want the most and save for them. Budgeting helps to reach your goals. There are three types of goals which are:

1. Long range goals: These are things which might include a house, a car or education for your children. These goals might take years to accomplish.

2. Immediate goals: These must be met each week or month. for instance, shelter and food.

3. Emergencies: These must be prepared for also. All emergencies are not alike. Some families may have a long illness by the father so that he is no longer able to work or a car that needs repairs so a man and wife can

get to work is another type of emergency. Some money should be included in the budget for this purpose. If it is not included in your budget, you might have to take money from an immediate goal (ex. a new coat) to meet some emergency.

Estimate your income

Once you have set your goals, decide how much money the family has from earnings and income. Don't include money you haven't earned yet, as in the case of a part time job. An example of this is: A mother has been baby sitting three days a week for extra income. This money has been included in the budget to add to the food money each week. Everything has been on a regular basis for the last three months and the family feels it can count on this money each. During the fourth month the mother is notified that her services are no longer needed. She will have to find a new part-time job or use money set aside for other items or go back and redo the budget so it will fit into their income.

Making the actual budget

You are now ready to plan your budget. Budget making can be very simple. There are budget books that can be bought at a drug store, variety store or book store.

You can use a pad and write down each item and amount to be paid to each. Keep all your receipts, even food tapes. Write down all the nickles and dimes that you spend. It might not seem like much but it can throw your budget out of balance. These nickles and dimes could add up to dollars and without a record of them you would have a tough time trying to figure out where they were spent. Don't forget to include insurance (health, life and car.)

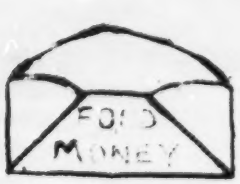
Included here are three ways to make a budget:

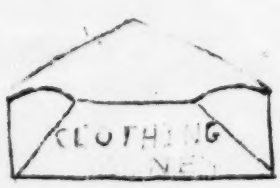
1. The Envelope System
2. Bill Paying Worksheet
3. A Budget Form

Pick the way you feel would be best for your family. Happy Budgeting!

The Envelope System

After writing down all items to be paid during the month, prepare envelopes by marking them with the name of the item such as rent, food, clothing and others. Each week, two weeks or month (this is based upon when you receive your income) place the money you are going to spend for each item in its envelope. Every item must have its own envelope. Do not borrow from any envelope to take care of something you left out of your budget.





SAMPLE

BUDGET

		PAY PERIOD			
		No 1	No. 2	No. 3	No. 4
	DATE				
	INCOME				
	INCOME SPOUSE				
	TOTAL				
EXPENSES	WEEKLY MONTHLY				
Housing: Rent or Mortgage					
Utilities					
Food					
Car Payments					
Clothing					
Insurance: Health & Life					
Car Insurance					
School expenses					
Savings					
Newpaper					
Baby (nursery, etc.)					
Lunches: school & work					
Deductions on Job					
Entertainment					
Cleaning/Laundry					
Personal Expenses					
Church					
Miscellaneous					

BILL-PAYING WORKSHEET

Bills sometimes seem to get ahead of the money, when it happens, try this approach to help get current and back on your feet again. Many families use this method all the time because bills just about match the money each payday. This worksheet will show you if there is a need to revise some of your due dates for bills, and in some cases, creditors have been more than happy to change the payment dates when they see just what your problem is.

Take home pay is $_____(His $_____;Hers $_____). Ages of family members:_____,_____,_____,_____,_____. Pay period is _____(weekly, monthly, etc.)

	week					
	Date					
Total						
	Rent or mortgage payment					
	Groceries					
	Fuel					
	Electricity					
	Water					
	Telephone					
	Insurance					
	Child Care					
	Clothing					
	Miscellaneous					
	Other expenses					

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TWO PAY CHECKS IN A FAMILY

by Shirley Archie

Two pay checks are good but sometimes it can also hurt you because we base our living standards on both checks. Sometimes when there are two pay checks in a family, one person will feel entitled to spend most of the money for his or her own purposes. This can hurt if no money has been allocated for this and as a result there is not money enough to pay the bills.

Every family with a second check should decide how much tax will result from the added income and have enough taxes deducted so that there will be no need to pay a lump sum payment at income tax time.

Some do's and don'ts for successful budgeting when there are two pay checks.

1. Do plan what you are going to spend ahead of time and make your planning a family affair.

2. Do keep a record of all spending.

3. Don't rely on your spouse's income for long term bills such as the house payment or car payment. Your spouse may have to stop work any time because of illness or loss of job.

4. Don't try to live on next week's pay check this week.

5. Don't buy on impulse. Just because a store has something on sale, don't buy it without thinking it over. You may not need it and you might not have the money in your budget to pay for it.

6. Don't budget to the penny but leave some so you and your spouse will have money for personal things.

7. Don't forget to include money for entertainment vacations or any clubs to which you may belong. If you don't you will end up borrowing money from your obligations or from a loan company or bank.

SOME SUGGESTIONS ON VOLUNTEER USE

IN THE SOCIAL SERVICES

by Jane Montgomery and Rhonda McLean

Community volunteers have been utilized, or have been projected for use in the Johnston-Lee Community Action Head Start Program in Smithfield, North Caroline, in ways such as these:

- An attorney speaking on wills
- A banker discussing credit
- Mental health clients discussing what the community mental health program does
- Nutritionist discussing consumer education and including a shopping trip to the grocery
- Cooking demonstration featuring nutrition information
- Parents participating in a music program
- Grandparents (RSVP, etc.) as volunteers
- Technical Institute offering credit for First Aid course
- Health Department conducting a program on TB
- Volunteers operating a Clothes Closet

Businesses are potential sources of free, useful items. To develop a special project such as a Breakfast with Santa for the holidays or in seeking assistance from community and church groups, requests should be made early.

Examples of civic and church participation might include, also, a pledge to provide certain types of wrapped gifts not to exceed, say, $1.50 to $2.00 in value.

Certain businesses traditionally give away items as a form of advertising. Try the following for the listed gifts or something else of like value:

Banks, savings and Loans -- candies, gum, rain scarves
Milk Company you deal with -- ice cream, milk
Motels -- soap
Funeral homes, jewelry stores -- songbooks
Drug stores, variety or "dimestores" -- balloons (for decorations)
Civic clubs, churches -- wrapped pledged gifts
Plants (factories) -- raw material, finished items
Restaurants -- coloring books, hand puppets
theaters -- free tickets to movies, plays, puppet shows

SUGGESTIONS FOR PREPARING A PARENTS' COMMUNITY RESOURCE BOOKLET

by Barbara Farren

The Social Services Performance Standard (#4) declares "the program must work in close cooperation with existing community resources." This cooperation must include "preparing and distributing a community resource file for Head Start families and staff."

General Format "Problem" Listings

It is helpful to parents if the table of contents is arranged by problem areas with alphabetizing of the agencies under the problem category. Telephone numbers and page numbers are helpful.

Ex., CHILD PROBLEMS, COUNSELING AND HELP WITH

Children's Home Society (274-1538). . . . 4

Family Service/Travelers' Aid (273-3691).10

Greensboro Association for Retarded Children (273-3691) 13

Greensboro Public Schools (275-8281). . .21

Greensboro Department of Social Services (373-3701) 27

Cross-listing

Several agencies will be cross-listed (ex., Department of Social Services may fall under "FOOD," "FINANCIAL AID," "EMERGENCY ASSISTANCE," etc. This is more work for the compiler(s) of the booklet, but it does make it easier for parents to locate help.

General Format Agency Listings

Ex., NAME: Department of Social Services

ADDRESS: 301 N. Eugene St., Greensboro

PHONE: 373-3701 HOURS OF SERVICE: 8 A. M.-5 P. M., Mon.-Fri.

SERVICES:

1. Protective services to children
2. Adoption and foster care services to children
3. Homemaker services
4. Emergency counseling
5. Family planning
6. Food stamps
7. Day care

LINC AGENCY STAFF DEVELOPMENT
RESOURCES INFORMATION FORM

NAME OF AGENCY _____

ADDRESS OF AGENCY _____
Street or P. O. Box City State Zip

TELEPHONE _____ PUBLIC OR PRIVATE _____
(Circle One) HRS. OF OPERATION

PERSON CONTACTED _____
POSITION

LIST KINDS OF TRAINING YOUR AGENCY OFFERS:
1. _____
2. _____
3. _____
4. _____

WHO IS ELIGIBLE? _____

HOW TO APPLY? _____

_____

IS THERE A WAITING PERIOD? ____YES ____NO

IF SO, HOW LONG? _____

DOES YOUR ORGANIZATION PROVIDE ASSISTANCE, GRANTS, FELLOWSHIPS, SCHOLARSHIPS, ETC? ____YES ____NO

IF YES, PLEASE EXPLAIN _____

WHO IS ELIGIBLE? _____

HOW TO APPLY? _____

IS THERE A WAITING LIST? ____YES ____NO

IF YES, HOW LONG?

MATERIALS AVAILABLE (SLIDES, BROCHURES, ETC.) _____

_____

***

FOR LINC USE ONLY

PERSON OBTAINING INFORMATION _____ DATE _____

PERSON UPDATING INFORMATION _____ DATE _____

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THE HELPING RELATIONSHIP

Adapted by Barbara Farren and Social Services staff,
Guilford County Head Start
from The Helping Interview by Alfred Benjamin*

It is not an easy thing to give help to another person in a way that will strengthen him in doing a better job in handling his own situation. And it is not an easy thing to receive help from another person. Why is this so?

Let's first look at the difficulties from the standpoint of the person receiving the help whom we will call the client.

1. It is hard to admit your difficulties to another person unless you trust him and feel sure he will not take advantage of what you have told him to hurt you. This may be easy with a friend. But it is harder with your boss, your subordinate or even a colleague working at the same level.

2. You may be looking for assurance and sympathy rather than help in seeing your difficulty more clearly and realistically. You, as well as other people, will have to change in solving any problem in your working situation. When the helper points out ways in which you may be contributing to the difficulty in the situation, ways which you must try to change, you may get defensive and stop listening to what he is saying.

3. Often a person is unaware of what he is doing to other people in his situation. Solving a human problem often means uncovering some sides of yourself of which you are not aware. Most of us want to keep our images of ourselves when these are comfortable and self-assuring.

4. It is hard for some people to be dependent on another person. We must depend on the person who is helping us and such persons will fight their dependence on the helper. Other people tend to be overdependent. They may want the helper to tell them what to do, not to think the problem through for themselves.

5. Each of us thinks he knows his situation. What can an intruder tell me about my problem? This is frequently an initial attitute of the client toward an outsider helper, whether it is expressed openly or not. Of course rationally an outsider can often help us to see our situation, to which we are too close, in a new light. But a person's approach to his own problem is seldom if ever, completely rational.

Now let's look at the difficulties in helping from the standpoint of the helper.

1. The helper is frequently seduced into a telling role. This is especially common where the client tends to be over-dependent. But all of us, unfortunately, often see the role of helping as telling the client what he should do, whether our advice fits his abilities or power or

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meets his fears and anxiety about doing something new and different.

2. The helper often takes advantage of the helping situation to show how bright, knowledgeable and experienced he is in the matter under discussion. Rationally, the goal is to strengthen the client in seeing his problem more clearly and in choosing ways of meeting the problem which are congenial and possible for him. But, of course, helpers are never completely rational in their approaches to problems.

3. We have seen that clients tend to become defensive in talking about themselves in their situations. The helper may meet defensiveness with pressure and argument. This usually increases client defensiveness and the amount of leveling between the two falls toward zero.

4. Sometimes a helper confuses being helpful with reassuring the client, overpraising him, playing down his responsibilities for the trouble he is encountering, telling him -- in effect -- that he doesn't need to change along with other people in improving the situation. This isn't really helpful, of course. It doesn't challenge the client's view of himself where this is false or limited. No change is likely to occur as a result of such a phony-friendly approach to helping.

These are some of the difficulties both in receiving and giving help. What would a good helping relationship look like as these difficulties are worked through?

1. Both client and helper would have trust in each other. This doesn't mean that they are uncritical of each other. It means rather that each feels that he can be honest with the other and that neither will use the "cooperativeness" of the helping relationship to embarass or hurt the other in outside relationships.

2. The goal of the helping is a joint exploration of what the client's problem actually is and what the realistic possibilities of action by the client to improve it actually are. The helper cannot solve the client's problem for him -- he can help him to develop a more realistic solution for himself.

3. The helper questions and listens to the client more than he tells him -- he doesn't reach to solutions before the nature of the problem has been explored. The client helps the helper by giving information freely and by thinking along with the helper what new light this information throws on his problem.

4. The helper responds to defensiveness on the part of the client not by trying to argue it away or by battering it down. He tries to figure what he is doing that is threatening the client and tries to reduce the threat.

5. The helper doesn't avoid points that the client finds it hard to talk about freely. He tries to find ways of making it easier to talk about these by being non-judgmental, by making it seem normal for any person to have difficulties and problems, by believing that the client can improve.

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More and more, directors are being asked to become helpers to others in the organization, to subordinates, to colleagues, even to their employers. Learning skills of giving help is learning part of the director's job.

It is equally true that directors are frequently called upon to be receivers of help -- from their employers, from colleagues, even from their subordinates. Learning skills of receiving help is learning part of the supervisor's job.

The helping relationship doesn't always fit traditional conceptions and practices of the director's role. Making a better fit between helping and bossing, between receiving help and giving it, is one of the important unfinished tasks of modern administration.

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FAMILY PRIVACY ACT GIVES PARENTS RIGHT TO SEE RECORDS

Reprinted from COYC* News and Notes

The Family Educational Rights and Privacy Act, a sweeping bill that requires public and private day care centers, nursery schools, kindergartens, nursery schools, kindergartens, schools, colleges, and universities receiving federal education funds to open their records to parents, went into effect November 20, 1974.

The North Carolina Attorney General's Office reports that the law also applies to schools, centers and institutions with tax-exempt status.

The act requires that parents be allowed to inspect and review all material in their child's folder, and any other records kept on their child.

Penalty for noncompliance is the withholding of federal education funds or possible loss of tax-exempt status.

*Council On Young Children

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PAGES FROM THE

SOCIAL SERVICES TRAINING SCHEDULE

JULY THROUGH DECEMBER 1973

by Guilford County Head Start
of United Day Care Services, Inc.

General Objective

To provide Social Services/Parent Involvement staff with orientation to overall Head Start Program, Component Goals, structure and philosophy, with emphasis on providing staff with specific skills needed to achieve Social Services/Parent Involvement objectives listed in performance standards.

July 20, 1973: Specific Objective: Orientation to Head Start philosophy, structure Component Goals. All seven performance standards.

To be trained: Social Services/Parent Involvement and Health Staff members.

Trainer: E. Pethel, Social Services/Parent Involvement Coordinator.

Materials Needed: Structure chart, black board.

July 27, 1973: Specific Objective: To provide Social Services/Parent Involvement Staff with information on record keeping, use of necessary forms. Performance standard #2.

To be trained: Social Services/Parent Involvement and Health Staff.

Trainers: Pethel and Eller, Health Coordinator.

Materials Needed: Folders, work schedules, time reports, mileage sheets, TSOR* cards.

July 31, 1973: Specific Objective: 1. Reinforce previous staff learning regarding proper use of needed forms.

2. Give specific information to SS/PI staff regarding job responsibilities.

3. Introduction to recording.

4. Introduction to concept of follow-up. Performance standards #2, #3.

To be trained: SS/PI Staff.

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July 31, 1973: (cont'd)

Trainer: Pethel.

Materials needed: Job descriptions of each Family Worker, example of recording in Head Start family record, blackboard.

August 3, 1973:

Specific Objective: To help Family Workers individually through weekly one-hour conferences around job problems. All performance standards.

To be trained: SS/PI Staff.

Trainer: Pethel.

Materials needed: Work schedules, dictation mileage sheets, time cards.

August 24, 1973:

Specific Objective: 1. To help Family Workers to make connection between their daily activities and overall Head Start goals. 2. To help Family Workers learn how use of scheduling relates to Head Start purposes. All performance standards.

Trainer: Pethel.

Materials needed: Work schedules, newsprint, magic marker, masking tape, list of (duties) common to Social Services job duties, small tablets for each Family Worker, blackboard.

August 27, 1973: (Pre-Service Training, 10 A.M.)

Specific Objective: To provide Head Start staff with overall view of basic purposes and philosophy of SS/PI* in Head Start. All performance standards.

To be trained: Family Workers, Health Aides, Teachers, Assistant Teachers, Secretary, Parents, Volunteers.

Trainer: Pethel.

(Pre-Service Training, 1 P.M.)

Specific Objective: To reinforce and help staff re-learn how needed forms are related to overall SS/PI performance standards. All performance standards.

To be trained: SS/PI staff, parents, volunteers.

Trainer: Pethel.

Materials needed: Performance standards, mileage sheets, work schedules, time cards, sample agenda for conference with SS Director, sample agenda for teacher and teacher-assistant conference, blackboard.

*Social Services and Parent Involvement

August 28, 1973: Specific Objectives: 1. Learn purpose and use of home visit. 2. Be introduced to concept of relationship in delivering Social Services. 3. Be introduced to Parent Involvement and how relationship concept feeds into the rendering of this component. 4. To introduce beginning techniques of interviewing. 5. To assist staff in making connection between interviewing techniques, assessment of needs, involving parents in all components of Head Start, and the performance standards. Performance standards #1, #3, #5.
To be trained: SS/PI Staff, Parents, Volunteers.

Trainers: Pethel, Brenda James, Department of Social Services and ex-Head Start Family Worker.

August 29, 1973: Specific Objective: To reinforce objectives of August 28, 1973. Performance standards #1, #3, #5.

To be trained: SS/PI Staff, Parents.

Materials Needed: Blackboard, role play situations typed up and ready for distribution, performance standards, training paper on making helpful responses.

September 7, 1973: Specific Objectives: 1. Reinforce and build on specific techniques for interviewing. 2. To provide staff learning experiences through role-play for explaining Head Start purposes to parents. 3. To provide staff learning experience through role-play for dealing with unexpected and difficult situations (i. e. verifying income, parents' resistance and hostility, parent apathy, etc.) Performance standards #1, #3, #4, #5, #6, #7.

To be trained: SS/PI Staff.

Trainer: Pethel.

Materials needed: Training room, blackboard, role-play situations.

September 14, 1973: Specific Objectives: 1. To acquaint staff with 70.2 guidelines on Parent Involvement. 2. To provide staff with role-play situations for explaining Parent Involvement to parents. 3. To provide staff beginning concepts in organizing and maintaining parent groups. 4. To provide staff with information on structure and composition of center committees, policy committee and policy council. 5. To make connection between objectives Number 1, 2, 3 and 4 with Head Start goals as outlined in performance standards and 70.2 manual.

To be trained: SS/PI Staff.

September 14, 1973: Trainer: Pethel
(Cont'd)

Materials needed: 70.2 Manual, performance standards, blackboard, pre-conceived and feed-in role play situations from staff. Note: This training session cancelled due to scheduled session by SDC on same topic for September 25, 1973.)

September 21, 1973: Specific Objectives: 1. To introduce staff to early childhood learning concepts. 2. To learn ways to communicate these concepts to parents. 3. To learn ways to encourage parents to teach their children at home. Performance standards #1, #3, #4, #5.

To be trained: SS/PI staff, parents.

Trainer: Pat Stapleton, Center for Development of Leadership for Child Care.

Materials needed: Projector, Head Start classrooms (2), meeting room at First Presbyterian Church.

September 27, 1973: Specific Objectives: To provide staff with information on procedures and processes in relation to career development. OCD Instruction 6902-1.

To be trained: All Head Start staff.

Trainer: Pat Jones, S. D. C.

October 5, 1973: Specific Objectives: 1. Follow-up on training done September 21, 1973. 2. Reinforce staff learning. 3. Post-test staff. 4. Role-play for purposes of connecting early childhood learning concepts with Head Start purposes for children and parents. Performance standards #1, #3, #4, #5.
To be trained: SS/PI Staff; parents.

Trainer: Pat Stapleton.

Materials needed: Meeting room, blackboard.

October 12, 1973: Specific Objective: To introduce staff to services offered by Guilford County Department of Social Services -- financial and non-financial. Performance standards #1, #2, #3, #5, #7.

To be trained: SS/PI Staff, Health Aides, parents.

Trainer: Ann Clegg, Training Officer, D. S. S.

October 19, 1973: Specific Objectives: 1. To build on basic information in 70.2 manual on Parent Involvement. 2. To use objectives planned for September 14, 1973.

To be trained: SS/PI Staff, Parents

Trainer: Pethel

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Materials needed: Meeting room, blackboard, role-play situation.

October 26, 1973: (Coordinate with Eller): Specific Objectives: 1. To build on beginning skills in interviewing. 2. To build on beginning skills in making connection between offering services to Head Start families and Head Start purposes and goals. Performance standards # 1, #2, #3, #4, #6, #7.

To be trained: SS/PI staff, Health Aides.

Place: High Point

Trainer: Pethel

Materials needed: Meeting room, case recording done by a Family Worker.

November 2, 1973: (Coordinate with Eller): Specific Objective: To learn about one service offered by Health Department: family planning. Performance standards #1, #3, #4, #5.

To be trained: SS/PI staff, parents, Health Aides.

Trainer: Mrs. Sara Nell Niver, PHN with Family Planning Division, 208 South Spring Street

Materials Needed: Open

November 9, 1973: (In High Point, Coordinate with Eller): Specific Objectives: 1. To study staff case recording in order to look at A. What help did Family Workers offer parent? B. How was help offered? C. What did this home visit have to do with Head Start purposes and goals for SS?PI? D. How might the Family Worker have used herself more effectively during this visit to further Head Start purposes. All performances standards.

To be trained: SS/PI staff, parents, volunteers.

Materials needed: Copies of one Family Worker's case recording, training room, blackboard.

November 16, 1973: Specific Objective: 1. To study staff process recording of a parent meeting in order to: A. See what help Family Workers offered parent group in groups functioning. B. To see how parents were more informed after meeting about Parent Involvement in Head Start than before meeting. C. To check on Family Workers' follow-up with parent groups. D. To see how Family Workers offered help to parent group in planning, using community resources, etc. 70.2 Manual, Performance Standard #5.

To be trained: SS/PI staff, parent committee officers

Trainer: Pethel

Materials needed: Process recording of parent meeting, training room, blackboard.

November 23, 1973: (Coordinate with Eller): Specific Objectives: 1. To learn assessment skills. 2. To learn to interpret date. 3. To be given some data on working with families who seem difficult, disinterested, and uncooperative. 4. To learn to make the connection between objectives #1, #2 and #3 and Head Start purposes and goals. Performance standards #1, #2, #3, #4, #7.

To be trained: SS/PI staff, Health Aides

Trainer: Mrs. Pat Duff, A & T State University, Assistant Professor in Social Services.

Materials needed: Open

November 30, 1973: Specific Objectives: 1. To acquaint staff with domestic and juvenile court services and procedures. 2. To learn specifics of how the court operates. 3. To learn how Head Start families can more effectively use court procedures. 4. To help staff learn how the local court system connects up with Head Start goals and purposes for children and families. Performance standards #1, #2, #3, #4, #5, #7.

To be trained: SS/PI staff, parents

Trainer: Court personnel, Mrs. Claudia Burroughs, others.

Material needed: Open

December 7, 1973: Specific Objective: To learn more indepth skills in recording. Performance standard #2.

To be trained: SS/PI staff

Trainer: Pethel

Materials needed: Case records, role-play situations

December 14, 1973: (Coordinate with Eller): Specific Objective: To learn how Social Services staff can function as advocates in the community on behalf of Head Start families and children. Performance standard #3-f.

To be trained: SS/PI staff, Health aides

Trainer: A & T Social Services Professor

Materials: Open

A LISTING OF AGENCIES AND ORGANIZATIONS

PROGRAMS SERVING FAMILIES AND CHILDREN MAY UTILIZE

LINC Child Development Training Center

Resources	Emphasis or Purpose
Federation of Negro Women's Clubs	Program Emphasis: Any charitable services. Participate in workshops of various types such as clothing, food, etc.
The Garden Club	Program Emphasis: To provide services in regard to the protection and conservation of natural resources. Further emphasis is on beautification and restoration of natural resources.
Home Economics Division of the Vocational Association. (Contact County Agricultural Center)	Purpose of Organization: To assume and maintain active state leadership in the promotion of vocational and practical arts education. To render services to local communities in stabilizing, extending and promotion vocational education.
Extension Homemakers Association (Contact County Agricultural Center)	Program Emphasis: Beautification, Citizenship, Education, Clothing, Family, Life, Food, Nutrition, Health, Home Management, House Furnishings, Music and Cultural Arts, Safety and Youth.
American Red Cross	Emergency assistance, personalized and social welfare services, counseling service, and blood center. Training courses in the care of new born babies, care of sick and injured, first aide, small craft and water safety, first aide on the highway, etc.
Girl Scouts of the U.S.A.	Purpose: Provide any charitable services
The Grand Chapter of Order of Eastern Star	Purpose: Charitable and Benevolent Projects

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Council of Family Service Agencies, Inc.	Program Emphasis: Counseling, marital discord, discord in parent-child relationships, personal adjustments, etc.
Council of Churches	Program Emphasis: Christian Education
Civitan International	Program Emphasis: Civitan activities are directed to youth programs, boys homes, and mental retardation programs.
Family Life Council, Inc.	Purpose: To bring together family-minded organizations and individuals to exchange ideas and concerns of the total family.
Federation of Music Clubs	Program Emphasis: Sponsors national music week, campaigns for better television and radio. Participate in musician education sessions for churches and groups.
Jaycees	Program Emphasis: Leadership training, community development, mental health, mental retardation, agricultural, youth development, public relations, etc.
Kindergarten Association	Program Emphasis: Child Development, better instruction in kindergartens, equipment and supplies, etc
Library Association	Program Emphasis: Better Library services
Recreation and Park Society, Inc.	Program Emphasis: Promote recreation
Art Society	Program Emphasis: Encourage more people to appreciate the Arts
Symphony Society, Inc.	Program Emphasis: Concerts for adults and children in rural areas as well as cities, symphony workshops and symphony stories for children.
United Community Services, Inc.	Program Emphasis: To develop, strengthen and promote the United way of campaiging and community planning through the provision of community organization services to communities.

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Dietetic Association	Program Emphasis: Expanding the effectiveness of dietitions/ nutritionists to meet the nutritional needs of humanity.
Association for the Blind, Inc.	Program Emphasis: This organization is a non-profit lay organization sponsored by the lions clubs and interested in the welfare of the blind and visually impaired citizens.
Dental Society	Program Emphasis: May provide planning and administration of dental services for Head Start children.
Heart Association	Program Emphasis: The Heart Association in cooperation with the North Carolina Regional Medical Program conducts a state-wide strike Rehabilitation program, a cardio-pulmonary resuscitation program, a coronary care unit project and training of personnel in units and heart sounds screening project to detect abnormal heart sounds in school age children.
Mental Health Association	Program Emphasis: Expanded and more comprehensive community mental health services. Expanded and more comprehensive children's mental health services.
Tuberculosis and Respiratory Disease Association	Program Emphasis: Promoting programs of case finding, health education, rehabilitation and research in cooperation with official voluntary agencies concerned with health problems.
Medical Society	Program Emphasis: May provide all types of health services, consulation, planning and administrative functions.
State Crippled Childrens Programs	Program Emphasis: Program provides funds for medical care of children found to have certain types of crippling and handicapping conditions.
Armed Forces Medical Program	Program Emphasis: Provide medical services for dependent children of military personnel.

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Public Health Department: (Title XIX Medicaid. Usually listed under county or state public health)	Program Emphasis: Provides funds to purchase diagnostic and treatment services for a wide range of health problems to poor children. Exact services paid for eligibility requirements vary from state to state.
Public Health Department: (Neighborhood Health Centers)	Program Emphasis: Provide all types of health services.
Child Welfare Services: (Contact County Department of Social Services)	Program Emphasis: Adoption services, aid to families with dependent children, day care, homemaker services, etc.
U. S. Dept. of Agriculture Farmers Home Administration (Contact nearest federal office for address)	Loans to rural individuals and groups or those recently living in rural areas.
U. S. Department of Agriculture Food Stamp Program (administered through Depts. of Social Service, etc.)	Program Emphasis: Stretches the food dollar for households with low net incomes. Food stamps are sold (sometimes given) to qualifying households and are used to buy food items only.
U. S. Department of Agriculture WIC Supplemental Food Program (contact Health or Social Services departments locally to learn if your locality is included)	Program Emphasis: Limited income pregnant and nursing women and young children (usually under four years, receive credits for certain foods or in some cases, the food itself. Operates on limited basis geographically).
Community Colleges, Technical institutes	Program Emphasis: May offer classes in broad fields of consumerism, family living, industrial arts, citizenship, health, safety, creative arts, liberal arts.

Other Resources:

Universities or Colleges
(May offer speech, hearing tests, etc., special library services)

State Department of Employment
(Information on job programs -- Neighborhood Youth Corps, New Careers, Job Corps)

YMCA, YWCA, YMHA, etc. (Young Men's, Women's Christian and Hebrew Associations) Churches

Urban League, NAACP

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County Agricultural Center
(4-H, FFA information)

Farm Bureau -- private organization
(Contact County Farm Bureau)

Veterans' Administration, see U. S. Government listing in telephone directory
(Information for veterans and dependents, survivors)

American Legion
(Different posts provide different services to veterans, their families and the community)

Lions

Shriners
(Operates regional hospitals for crippled children. Contact the organization at 2100 North Pleasantburg Drive, Greenville, S. C. 29609 if this information is not available in your community)

United Fund
Community Chest

Alcholics Anonymous

Crisis Control, etc.
(Emergency listing. Check with telephone information operator)

Organizations for the retired
(RSVP, AARP, etc.)

Boy Scouts

National Dairy Council

Power and Light Company

Water Department

Parks, Museums, Zoos

Business and industrial firms (banks, supermarkets, etc.)

Better Business Bureau

Chamber of Commerce

Bus, train, airline terminals

Telephone office

Legal Aid Society

THE CHANGING AMERICAN FAMILY

Adapted by John Niblock from The Future of the Family[1]

If the family has been the most enduring of our human institutions, it also has been one of the most variable. Richard Farson has listed eight areas of significant change in the American family:

1. The shift from the extended kinship system to the nuclear family (50 years ago half of the households in the nation had at least one other adult besides the parents; today, fewer than five percent do.)[2]

2. The disappearance of the family functioning as a unit in the economic, religious and social spheres.

3. The trend from lifetime monogamy to divorce and remarriage as a cycle.

4. A loss of influence, so that the family today is considered a secondary, rather than primary, group of orientation.

5. Major family life-cycle changes due to changing social conventions and longer life expectancies (in 1890, the average wife was a widow when the last child left home; today, she and her husband have another 15 years of life together.)

6. The upheaval connected with the changing roles of women -- roles which become less and less family-oriented.

7. The corresponding increase in equalitarian relationships between husband and wife.

8. The generally acknowledged fact that the family is surrendering some of its socialization influence to various other social institutions and informal groups.

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1 Richard E. Farson, Philip M. Hauser, Herbert Stroup, and Anthony J. Wiener, The Future of the Family (New York: Family Service Association of America, 1969), pp. 30-33.

2 James Walters and Nick Stinnett, "Parent-Child Relationships: A Decade Review of Research," in A Decade of Family Research and Action, ed. Carlfred B. Broderick (Minneapolis: National Council on Family Relations, 1971), p. 130.

THE FAMILY: ITS IMPORTANCE AND ITS DIFFICULTIES IN TODAY'S WORLD

by John Niblock

...The family is not a biological or instinctual necessity, but a social invention designed to care for and instruct the young. Families may change in composition and differ among cultures, but basically they exist to provide for the rearing of children.[1] As one researcher describes it, "Human adults first bonded together with some commitment to permanence and exclusiveness in order to bring their children safely through the relatively long period of human immaturity and dependency."[2]

Because families exist to provide humans with the satisfaction of their most basic needs, they often fail.... Family structure and function are the elementary basis of social organization, and therefore the keystone of both the status quo and radical revolution. We all come from, and live in relation to, families.

Importance of the Family

The family is the most important and potentially the most effective influence on the psychological development of a person.[3] The people in a child's life provide the basis for the development of all of his skills. Earl Schaefer's research shows that parent-centered child development programs, when compared with "child-centered" programs, have equal immediate effectiveness, greater long-term effectiveness, greater cost-effectiveness and greater "spin-off" impact on the family and community.[4] Bronfenbrenner, examining preschool programs, found that "those programs in which the greatest and most lasting gains were made were home-based and directly involved the mother (or other full-time person who had a one-to-one relationship with the child)."[5]

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[1]Max Lerner, America As A Civilization (New York: Simon and Schuster, 1957), p. 552.

[2]Mary C. Howell, "Marriage, Parenthood and Family: Separate Domains of Change?" Harvard Educational Review, 44:1 (February 1974), 171.

[3]Miriam Seltzer, The Center for Youth Development and Research Focus, University of Minnesota, undated, p. 1.

[4]Earl S. Schaefer, "Parents as Educators: Evidence from Cross-Sectional, Longitudinal, and Intervention Research," Young Children (April 1972), 237.

[5]Child Care Data and Materials (Washington, D. C.: U. S. Senate Finance Committee, 1971), p. 110.

There probably is no list of things that children need that does not in some fashion include the notion of "a family that loves and wants the child." Similarly, there probably is no list of significant influences on a child that does not include the family.[6] Professionals in child-serving agencies will at least give lip service to the notion that "no child should be approached, assessed, treated, nursed, taught, or corrected without the parental influence being taken into account....without knowledge of the parents' influence neither the child's developmental successes and failures nor his social adjustments and maladjustments can be seen in their true light.[7]

The 1970 White House Conference on Children and Youth, asserting that programs for children could not circumvent the family, urged increasing participation of, and concern for, the family.[8] The pending Brademas-Mondale legislation on children's and family services would require the equavalent of an "environmental impact statement" for all legislation dealing with children and families -- all proposed federal legislation would have to have certification that it would not negatively affect families.[9]

Family background, Bachman contends, is a powerful force shaping an individual's capacities and accomplishments throughout his lifetime:

> The educational and occupational attainment of parents, the physical resources of the home, the personal relationships between parents and children -- these factors and many more are what we mean by family background. The impact of this background is visible early in the life of a child; his intelligence and ability to perform in school are in part predictable from knowledge of his background. Later, in adolescence, his educational and occupational aspirations are predictable in part from the attainments of his parents. Still later, his own attainments reflect quite clearly the stamp of his family background. Not only are his attainments influenced by family background; his values, attitudes and mental health are all subject to the pervasive and continuing effects of the family.[10]

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[6]Youth Encounters a Changing World (Minneapolis: Center for Youth Development and Research, 1972), p. 8.

[7]Joseph Goldstein, Anna Freud, Albert J. Solnit, Beyond the Best Interests of the Child (New York: Macmillan Publishing Co., 1973), p. 10.

[8]Rochelle Beck, "The White House Conferences on Children: An Historical Perspective," Harvard Educational Review, 43:4 (November 1973), 663.

[9]Walter F. Mondale, "A Family Impact Statement: A Response from the U. S. Senate," School Review 83:1 (November 1974), 14.

[10]Jerald G. Bachman, Youth in Transition: Vol. II: The Impact of Family Background and Intelligence on Tenth Grade Boys (Ann Arbor: Survey Research Center, Institute for Social Research, 1970), p. 194.

.... Urie Bronfenbrenner, in Two Worlds of Childhood, discusses at length what he sees as the increasing isolation of the family from society. Although family members are being forced to spend more and more time together, he concludes, this intimacy is not providing the expected degree of closeness and need-fulfillment....

This increased isolation of the family from the rest of the world, Bronfenbrenner suggests, is caused in part by the fragmentation of the extended family, a growing trend in society toward segregation by age, child labor laws which preclude children from working until their teens, working mothers, massive school consolidations, occupational mobility, separate residential and business zoning, and the disintegration and disappearance of the urban neighborhood.[11]

In most of the European societies from which most Americans came, a boy or girl grew up in the calling, the crafts, the ways of life and thought, of ancestral generations. Max Lerner asserts that these continuities have been broken by the drastic geographical movement, the occupational shift, and the social mobility of Americans. "It is rarer than in the past," he observes, "for children to grow up and raise their families in the homes, or even in the towns or neighborhoods, where they were born -- or on a similar level of living standards. As a result, the crucial process of social education, of inducting the growing child into the ways it is expected to follow, is carried on mainly not in the primary group of the family but in the larger society-as-a-whole."[12]

As the American family developed, it shed in-laws, grandparents, cousins, aunts, boarders, and retainers. It handed production over to offices and factories, religion to the churches, the administration of justice to the courts, formal education to the schools, medical attention to the hospitals. It has been stripped down to the bare frame of being marriage-centered and child-fulfilled.

Danger Signs for Families and Early Adolescents

Theorists and researchers predict problems for the family and the early adolescent. Chief among these seems to be vanishing social support for parents. Our society no longer views child-bearing and child-rearing with automatic approval.

In the age of the nuclear family, another reward for parents -- comfort and care in their declining years by their children -- also is lost. And this is a family function second only to child-rearing in many cultures.

The so-called support system for parents also holds few rewards. Parents of troubled adolescents find they usually receive the blame from

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[11]Urie Bronfenbrenner, Two Worlds of Childhood: U. S. and U. S. S. R. (New York: Basic Books, 1970), p. xvii.

[12]Lerner, p. 546.

counselors, teachers, and other youth workers, regardless of the circumstances. Feeling they have little control of their own family situation, parents often throw in the towel and begin to deny any obligation to, or responsibility for, their adolescents.[13]

John Holt points out that the increasing isolation of the family and the dizzying "future shock" world of the 1970s tends to give family members fewer options on how they deal with anxieties. More and more, the family has become the stage, and the spouse and child the actors. The age-segregation of society and the isolation of the family combine to dictate that the parents provide most of the adolescent's adult contacts, and especially disciplinary control. This scarcity of adult models and lack of contact with adults further restricts the adolescent at a time when he is striving to find out how to become an adult.[14]

Americans tend to marry young, with about one-fourth getting married before age 20 -- which greatly increases the chances of later divorce.[15] Divorces at all age levels have increased 80 percent nationwide from 1960 to 1972[16] to the point where one in every three marriages ends in divorce. Yet the rising divorce rate may not show a disbelief in marriage, but instead an intent to take seriously the American premise that a marriage is held together by love and common interests. The steadily rising rate of remarriage after divorce shows that Americans still believe in marriage, even after a disastrous experience with it. The stability of these post-divorce marriages does not differ markedly from that of first marriages.[17]

Adolescence is more difficult for the family and the child today. Before, there were more helping hands available in the home and in the community. Today, the nuclear family, with "occupants" living next door instead of neighbors, is on its own. The National Panel on High School and Adolescent Education finds this separation of family and community has created intense relationships within the family that make the launching of an adolescent a painful and wrenching experience for parent and child alike.[18]

Research on the Family and the Early Adolescent

Because the family is often one of the most important influences on a person, and because adolescence is by and large a "last change" stage in the development of a person, the widening gulf between family and society should be important. It would be reasonable to assume that the effects of changing society and family functions are under heavy study. It would be reasonable, but not true.

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[13]Diana Baumrind, "Coleman II: Utopian Fantasy and Sound Social Innovation," School Review, 83:1 (November 1974), 80.

[14]John Holt, "Free the Children: They Need Room to Grow," Psychology Today, 8:5 (October 1974), 133-136.

[15]Crisis in Child Mental Health: Challenge for the 1970's (New York: Harper and Row, 1970), p. 168.

[16]Susan Jacoby, "49 Million Singles Can't All Be Right," New York Times Magazine (February 17, 1974), 41.

[17]Lerner, p. 558.

[18]Report of the National Panel on High Schools and Adolescent Education (preliminary draft), organized by the U. S. Office of Education, 1972, p. 120.

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THE FAMILY: A CHANGING VEHICLE OF EDUCATION

by Leo F. Hawkins

Basic Approaches to Life

In thinking of the family as a vehicle of education it can be said that there is more to education than subject matter. The family has always been the vehicle by which children learned their basic emotional and social approaches to life. (Family here is thought of as any household in which children are reared.) Children have learned these most important matters from the family just because they have spent the first five years of their lives within the family. Some of these basic approaches to life involve:

1. What am I or who am I? This emotional approach is usually called "self-concept." The society helps the family decide what a child is, but the family gives this concept directly to the child.

2. How should I feel toward other people? How should I feel toward those who are close to me and those who are far away from me?

3. What should I do with my seventy or so years of time in this life? Emotional leads here involve the purpose of life and the all-important matter of motivation. For example, if I should get some education and work hard, why?

This list includes only three of the many emotional leads a family gives. The answers to most of these questions are given to a child in the atmosphere of his family. A youngster's whole being is touched by his "continuing environments," of which the family is primary. The school helps a person find words to use in describing his emotional answers, but those basic approaches to life are largely there before a child gets to school.

From time to time American society has made weak attempts to help the family with those basic tasks. Research on intervention programs indicates: 1) Head Start and similar programs are of very limited success when the family is not involved with the child. In a few years the child falls behind again and becomes a subject for dropping out of the mainstream of life even before dropping out of school. 2) When parents are actively involved in helping to teach the child over a period of years the ability of the child to "keep up" becomes more permanent (Schaefer, Families of the Future, p. 26 ff.).

The Family and Urbanization

The roles or functions of the family are changing under the impact of urbanization. A general way to describe these changes is to say that social norms are not as strong in the city. Family members can go places all over town and not be recognized. They interact with different groups at work, school, and church. In rural areas and small towns it is usually the same people in each place. In urban areas people can be more free than in rural areas to behave as they please. They may also be more lonely.

A more specific way to describe changing family roles is that of Ivan Nye (1974). A brief outline of his description ... will be useful here.

Emerging Family Roles

These roles are currently developing and the majority of people studied consider them important. They are

1. Therapeutic and serve for rehabilitation of family members

2. Recreational. (Families have more recreation than in the past even though some recreation is guided by agencies of society.)

3. Sexual responsibility. Sexual responsibility is both ways, and there is a decline in the double standard.

Traditional Family Roles

These roles almost universally agree with the past. There is disapproval and social sanctions for failure to perform roles relating to

1. Child care

2. Child socialization

3. Provider roles

Declining Family Roles

These roles many families are giving up. Any disapproval or sanctions are very weak and often do not exist. These roles are

1. Kinship roles

2. Housekeeper roles

Otto Pollak stresses the readjustment of power between males and females within the family (Families of the Future, 1972). In fact, he says that female power has always been there but is just now being made public. A function of marriage, he says, is to work out for the family its own unique pattern of male-female adjustment, equal or unequal.

Pollak joins with Vincent, Nye, Hill and others in emphasizing the emerging function of rehabilitation. In the face of organized bureaucracies on every hand the family serves to rehabilitate members after they have been out there all day in that school or factory or office. After being treated as an object the individual is supposed to be able to come home and be treated as a unique person in the family. How well this works is one of the many questions under study. Several of the writers mentioned point out that now the family is demanding that some of these organizations and agencies adjust to the family, and not always expect the family to adapt to bureaucratic needs. Examples are young couples who refuse to work at night at any job and couples who will keep looking until they can find meaningful work. These families demand that work be adjusted to the family.

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The Powerful Concept of Human Development

One of the most influential concepts of the past two generations is that every person should have an opportunity to develop into a complete person. The unique self-fulfillment of the individual has been a powerful force to help bring about universal education, liberation of women, and expectations of equal opportunity for minority groups. A few examples of this concept ... are: Peoplemaking by Virginia Satir, On Becoming a Person by Carl Rogers, and Free to Be You and Me by Marlo Thomas. This emphasis has become so strong that most family educators are part of it. With Satir, they are saying that the purpose of the family now, rural or urban, is to take persons, regardless of age, and provide an environment in which they can develop as much inborn potential as possible. There are many theories about how to do this task, but all involve the family. Koprowski (1973) says that leaders of both business and government need to help our society move from consumerism to a self-actualizing society.

Life Styles, Structures, or Forms of the Family Implied by Changes in Family Roles

In order to adapt to changing technology or to demand that bureaucracy do some adapting the family must be allowed to take almost limitless forms of structures or life styles. For example, take the family made up of a mother and several children. We put pressure on girls to get married, and in North Carolina 50.3% of brides are teenagers. We put pressure on men to be successful, and getting females pregnant is one way to do it. We pressure our millions of "consumer idiots" (Erikson, 1963) to buy more than they can afford. The result is that many men run away and we have a lot of families with a young mother and several children. Now such families are becoming accepted, "normal," and supported as families. Almost any study of emerging life styles will list at least fifteen non-traditional arrangements for living that need to be considered and accepted.

Very slowly the norms and laws of our society are having to catch up with the changes forced upon the family. Since technology and mobility help create these different forms our laws must continually be revised in the interest of the persons involved. Thus we are seeing legal changes related to divorce, property rights of women and children, family planning and abortion, and sexual relations between consenting citizens. Such changes are bound to continue and will probably always lag far behind the realities of human living within family groups.

The Ethical Role of the Family

In a republic that seeks to be democratic, such as ours, people must have a sense of indignation at wrong balanced by a tolerance of different moralities that are personal. If the family by example or out of fear and uncertainty leaves this ethical compartment of a child's life empty he is subject to being blown with the winds of extremes. Notice the current way many people are grasping at many forms of semi-religion and many forms of extreme self-denial. Any large university can find a dozen or more movements that reach students and demand all sorts of 100% percent devotion involveing food, sex,

reading, work, worship, and service for the cause. It helps very little to say that most of these people become rigid and half-dead in middle age and pass on the emptiness to their children.

A family, meaning the heads of any household that rears children, needs a set of beliefs about right and wrong that are carefully examined. If parents cannot accept the ethical teachings of some religion they ought to study humanism and our constitution and teach the ideas of right and wrong that are implied there. We have gone too far in measuring people by what "works" and by what people can get by with.

My conviction that the family should assume the task of teaching right and wrong was reinforced by a recent rereading of Chapter 8 in Erik Erikson's Childhood and Society (1963). Erikson shows how American society gets hung up on his preadolescent stage IV, putting greatest emphasis on industry and achievement, reflected in technology. Many Americans never go on to struggle with identity or achieve closeness to people, his stages V and VI. Our way of life and our religion is largely work and making money. Behind all this are our myths from the frontier that are still with us. Revolutionary American man kept on chasing his freedom and killing Indians long after those battles were history. John Henry with his nine-pound hammer and the lonely cowboy in the form of John Wayne are still with us on TV and in movies and books. Women were forced to take over within the family, and men invited "bossism" at work in order to offset the strong "mom" at home.

Erikson's questions are being played out in the American family. They are brought up here ... because they should be questions of ours.

> "But what will John Henry do in a double-breasted business suit? What will happen to his 'wire guts' when he must serve machines and finds himself caught in the impersonal machinery of modern life?" (p. 306)

... In case we become too pessimistic or perhaps cocky enough to think we can really evaluate the family of the present perhaps we should remember a recent lesson from history. From about 1890 till 1930 it was a regular practice of families to take in boarders or roomers. Now it is looked upon as an interesting and kind adaptation to help men who had to work out of town.... Let us hope that some of the changes we fear in our generation will turn out to be similar to the fear of boarders in the family.

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THE FAMILY: A CHANGING VEHICLE OF EDUCATION

by Leo F. Hawkins

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ACKNOWLEDGEMENTS AND CREDITS

IRA GIBBONS, Ph. D., now retired as Professor and Dean of the School of Social Work, Howard University, is the originator of the cover concept which interrelates the various social services into a wheel with the Child and His Family as the hub. Introductory remarks from DR. GIBBONS at a LINC Children's Center in-service training session form this issue's Guest Editorial.

During his recent illness, MRS. GIBBONS has been handling correspondence and she and DR. GIBBONS want friends to know their new mailing address: P. O. Box 157, West Yarmouth, Massachusetts 02673.

"A DECADE OF EARLY INTERVENTION PROGRAMS: WHAT WE HAVE LEARNED," by BETTYE M. CALDWELL, Ph. D., is reprinted through the cooperation of the author and the American Journal of Orthopsychiatry which originally published it in July 1974. DR. CALDWELL is with the Center for Early Development and Education at the University of Arkansas in Little Rock.

"EMOTIONAL DEPRIVATION IN EARLY LIFE" comes to us by way of a telephone conversation with IRENE GLASS, who shares some of the readings the Children's Services staff at Pitt County Mental Health Center, Greenville, North Carolina, have been doing in this area which, recently, has received increasing attention. IRENE GLASS is director of Children's Services in that mental health program and a former Social Services Coordinator for the LINC Children's Center in Greensboro.

The Day Care Services Newsletter from North Carolina provided Idea Exchange with definitions of child abuse and neglect which we included in an adapted article and called "SOME DEFINITIONS TO GUIDE US."

MELLIE HILL BARLOW, M. S. W., authored the informative document that Florence County Full-Year Head Start has adopted in Florence, South Carolina. GEORGIA MOYE of the Idea Exchange Advisory Committee sent us the article, which we've titled "SOUTH CAROLINA PROGRAM SETS OWN POLICY AND PROCEDURES ON CHILD ABUSE AND NEGLECT." MELLIE BARLOW has been Social Services Director for the Florence program since 1966, and is a member of the Academy of Social Workers and of the National Association of Social Workers.

ELLEN FARRIOR, of Social Services, Cleveland County Head Start, Kings Mountain, North Carolina, provided a "CASE STUDY IN SOCIAL SERVICE COORDINATION FOR INDIVIDUAL DIAGNOSIS AND PLACEMENT." This is an example of the cooperation that Idea Exchange is getting as programs begin to share accounts of their experiences with one another.

Advisory Committee member MARGARET C. VIDAL is the book reviewer for "TO PROTECT AND RESPECT: A CHILD ADVOCATE'S HANDBOOK," written by

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JOHN W. PELOSI and SANDRA L. JOHNSON. This is a companion booklet to "A MATTER OF SERVICE: HOW TO MONITOR AGENCIES THAT SERVE CHILDREN," by [illegible] D. HOLDER, JOHN W. PELOSI and REBECCA T. DIXON, also published as part of the Child Advocacy System Project of The Learning Institute of North Carolina, 1006 Lamond Avenue, Durham.

"[illegible]CUS ON THE FAMILY: A PRIORITY FOR HEAD START" is by JOHN NIBLOCK, Associate Director for The Learning Institute of North Carolina (LINC) in Durham and is drawn largely from the writings and addresses of EARL S. SCHAEFER of the University of North Carolina at Chapel Hill. Professor Schaefer is Senior Investigator for the Frank Porter Graham Child Development Center and director of its Family Research Project.

CORRECTION: The project referred to on page 19, paragraph five, of this article was conducted in Washington, D. C.'s inner city rather than at Chapel Hill. Also on page 20, in the seventh paragraph which begins "Head Start ..." should have its second sentence amended to read "Many professionals ..." rather than "Most ...."

[illegible]AEFER, Ph. D., is the author of "SELECTED REFERENCES RELATED TO PROFESSIONAL SUPPORT TO THE FAMILY" which was combined from two of his recent addresses.

Guilford County Head Start Family Worker [illegible] ARCHIE deals with financial matters in her two articles "KEE[illegible] A FAMILY BUDGET" and "TWO PAY CHECKS IN A FAMILY" both based upon information received during a consumer workshop conducted by The University of North Carolina at Greensboro.

JANE MONTGOMERY from Johnston-Lee Community Action Head Start in Smithfield, North Carolina, and RHONDA McLEAN (formerly with Head Start in Smithfield and now Associate for Field Services - Parent Involvement for the LINC Leadership Development Program met during the December holidays and discussed volunteers. "SOME SUGGESTIONS ON VOLUNTEER USE IN THE SOCIAL SERVICES" was developed from that conversation.

Advisory Committee members BARBARA FARRAN and JOE MacLEOD discussed "SUGGESTIONS FOR PREPARING A PARENTS' COMMUNITY RESOURCE BOOKLET" in January in Greensboro. MacLEOD, director of the four-county rural WAMY Head Start program in Spruce Pine, North Carolina, recommends implementing the use of a resource booklet with an orientation to public transportation so that people will not only know of the agencies but be able to physically reach them easily. Another way in helping others become more self-sufficient.

BARBARA FARRAN is Social Services Coordinator for Guilford County Head Start of United Day Care Services, with [illegible] Greensboro and High Point, North Carolina.

THELMA SELLERS, LINC Leadership Development Program Staff Development Coordinator, calls the "LINC AGENCY STAFF DEVELOPMENT RESOURCES INFORMATION FORM" as a tool that has been used successfully by LINC Children's Center parents and the staff working jointly to [illegible]er information on social services.

BARBARA FARRAN and SOCIAL SERVICES STAFF of Guilford County Head Start titled their adaptation from Alfred Benjamin's The Helping Interview "THE HELPING RELATIONSHIP." Their article explores the views of the client and of the helper when social services are being sought and provided.

"PAGES FROM THE SOCIAL SERVICES TRAINING SCHEDULE, JULY [illegible] DECEMBER 1973" were supplied by Guilford County Head Start's Social Services Coordinator, BARBARA FARRAN. This gives an outline of a six-months training effort in the seven performance standards relating to Head Start social services.

"FAMILY PRIVACY ACT GIVES PARENTS RIGHT TO SEE RECORDS" from the COYC (Council on Young Children) News and Notes is reprinted as a reminder of the parental right to parent involvement, as well as to privacy. The newsletter "represents a combined effort on the part of the North Carolina Head Start Association, North Carolina Day Care Association, Association for the Education of Young Children, North Carolina Association for Children Under Six, and the LINC Children's 100 to share information and common concerns," according to JOHN NIBLOCK, who edits this publication from LINC in Durham.

"A LISTING OF AGENCIES AND ORGANIZATIONS PROGRAMS SERVING FAMILIES AND CHILDREN MAY UTILIZE" was prepared by the LINC Children's Center, based upon agencies utilized in Greensboro during the recent past. Some further agencies were added as the list was typed for this issue, but it is not intended as "complete".

"THE CHANGING AMERICAN FAMILY" and "THE FAMILY: ITS IMPORTANCE AND ITS DIFFICULTIES IN TODAY'S WORLD" are drawn from a Ford Foundation report written for the FORD FOUNDATION by JOHN NIBLOCK, Associate Director of LINC, Durham. Our appreciation to the FORD FOUNDATION for permission to use this material in its slightly changed format.

"THE FAMILY: A CHANGING VEHICLE OF EDUCATION" is by DR. [illegible] F. HAWKINS, Human Development Extension Specialist for the Agricultural Extension Service of North Carolina State University. This talk was presented at the second session of the Guilford County, N. C./National Endowment for the Humanities' Fall 1974 Rural Suburban Dialogue: Education--Learning in Transition.